

County of Los Angeles DEPARTMENT OF CHILDREN AND FAMILY SERVICES

425 Shatto Place, Los Angeles, California 90020 (213) 351-5602

February 10, 2016

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From:

Philip L. Browning

Director

HERITAGE GROUP HOMES FISCAL ASSESSMENT AND CONTRACT COMPLIANCE MONITORING REVIEW

The Department of Children and Family Services (DCFS) Contracts Administration Division (CAD) conducted a Contract Compliance Review of Heritage Group Homes (the Group Home) in March 2015 and a Fiscal Compliance Assessment in May 2015. The Group Home has five sites: two located in the First Supervisorial District; one in the Fourth Supervisorial District; and two located in the Fifth Supervisorial District and provides services to the County of Los Angeles DCFS placed children. According to the Group Home's program statement, its stated purpose is "to enable each child to develop the necessary interpersonal skills and self-esteem to successfully function as a self-sufficient and productive person in society."

The Group Home has five 6-bed sites; three sites serving girls and two sites serving boys, each licensed to serve children ages 12-17. At the time of review, the Group Home served 30 DCFS placed children, 12 boys and 18 girls. The placed children's overall average length of placement was nine months, and their average age was 16.

SUMMARY

CAD conducted a Fiscal Compliance Assessment, which included an agency-wide review of the Group Home's financial records, such as financial statements, bank statements, check register, and personnel files to determine the Group Home's compliance with the terms, conditions, and requirements of the Group Home contracts, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

The Group Home was in full compliance with 5 of 5 areas of the Fiscal Compliance Assessment: Financial Overview; Loans, Advances and Investments; Board of Directors and Business Influence; Cash/Expenditures; and Payroll and Personnel.

During CAD's Contract Compliance Review, the interviewed children generally reported: feeling safe at the Group Home; having been provided with good care and appropriate services; being comfortable in their environment; and treated with dignity and respect.

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Each Supervisor February 10, 2016 Page 2

The Group Home was in full compliance with 9 of 10 areas of our Contract Compliance Review: Facility and Environment; Maintenance of Required Documentation and Service Delivery; Education and Workforce Readiness; Health and Medical Needs; Psychotropic Medication; Personal Rights and Social/Emotional Well-Being; Personal Needs/Survival and Economic Well-Being; Discharged Children; and Personnel Records.

CAD noted deficiencies in the area of: Licensure/Contract Requirements, related to Community Care Licensing (CCL) citations.

Attached are the details of our review.

REVIEW OF REPORT

On May 6, 2015, Linda Lai, DCFS CAD held an Exit Conference with Group Home representatives: Maria Serratos, Group Home Administrator and Sandi Heyer, Assistant Director. DCFS staff included: Greta Walters, Out-of-Home Care Management Division (OHCMD). On July 7, 2015, Joe Jimenez Jr., held the Fiscal Exit Conference with Sandi Heyer, Assistant Director.

The Group Home's representatives were in agreement with the review findings and recommendations; were receptive to implementing systemic changes to improve compliance with regulatory standards; and were in agreement with addressing the noted deficiencies in a Corrective Action Plan (CAP).

A copy of this report has been sent to the A-C and CCL. The Group Home provided the attached approved Corrective Action Plan (CAP) addressing the recommendations noted in this report. CAD conducted a follow-up visit to the Group Home on July 24, 2015, to verify implementation of the CAP. No Fiscal Correction Action Plan was required. OHCMD provided technical assistance to the Group Home on May 6, 2015, to assist the Group Home with implementing their CAP.

If you have any questions, your staff may contact Aldo Marin, Board Relations Manager at (213) 351-5530.

PLB:EM:LTI:II

Attachments

c: Sachi A. Hamai, Chief Executive Officer
John Naimo, Auditor-Controller
Calvin Remington, Interim Chief Probation Officer
Public Information Office
Audit Committee
Sybil Brand Commission
Harbinder Heyer, Executive Director, Heritage Group Home
Lajuannah Hills, Regional Manager, Community Care Licensing Division
Lenora Scott, Regional Manager, Community Care Licensing Division

HERITAGE GROUP HOMES FISCAL COMPLIANCE ASSESSMENT REVIEW FISCAL YEAR 2014 –2015

SCOPE OF REVIEW

The Fiscal Compliance Assessment included review of Heritage Group Home (the Group Home) financial records for the period of January 1, 2013 through April 30, 2015. CAD reviewed the financial statements, bank statements, check register and personnel files to determine the Group Home's compliance with the terms, conditions, and requirements of Group Home contract, the Auditor-Controller Contract Accounting and Administration Handbook (A-C Handbook) and other applicable federal, State, and County regulations and guidelines.

The agency-wide Fiscal Compliance Assessment review focused on five key areas of internal controls:

- Financial Overview.
- Loans, Advances and Investments,
- Board of Directors and Business Influence,
- Cash/Expenditures, and
- Payroll and Personnel.

The Group Home was in full compliance with 5 of 5 areas of the Fiscal Compliance Assessment: Financial Overview; Loans, Advances and Investments; Board of Directors and Business Influence; Cash/Expenditures; and Payroll and Personnel.

FISCAL COMPLIANCE

The Group Home was in full compliance. CAD did not find any Internal Control deficiencies.

MOST RECENT FISCAL REVIEW CONDUCTED BY THE AUDITOR-CONTROLLER

A recent fiscal review of the Group Home has not been posted by the Auditor-Controller.

NEXT FISCAL COMPLIANCE ASSESSMENT

The next Fiscal Compliance Assessment of the Group Home will be conducted in County Fiscal Year 2015-16.

HERITAGE GROUP HOMES CONTRACT COMPLIANCE MONITORING REVIEW SUMMARY

License Number: 197804150 Rate Classification Level: 11

License Number: 191500101
Rate Classification Level: 11

License Number: 197801967 Rate Classification Level: 11

License Number: 197802215

Rate Classification Level: 11

License Number: 197804065 Rate Classification Level: 11

_		Rate Classification Level: 11 Rate Classification Level: 11					
		Contract Compliance Monitoring Review	Findings: March 2015				
	ı	<u>Licensure/Contract Requirements</u> (9 Elements)					
		 Timely Notification for Child's Relocation Provided Children's Transportation Needs Vehicle Maintained In Good Repair Timely, Cross-Reported SIRs Disaster Drills Conducted & Logs Maintained Runaway Procedures Comprehensive Monetary and Clothing Allowance Logs Maintained Detailed Sign In/Sign-Out Logs for Placed Children CCL Complaints on Safety/Plant Deficiencies 	 Not Applicable Full Compliance Improvement Needed 				
ŀ	ll l	Facility and Environment (5 Elements)	- Improvement Needed				
		 Exterior Well Maintained Common Areas Well Maintained Children's Bedrooms Well Maintained Sufficient Recreational Equipment/Educational Resources Adequate Perishable and Non-Perishable Foods 	Full Compliance (All)				
	III	Maintenance of Required Documentation and Service Delivery (10 Elements)					
	!	 Child Population Consistent with Capacity and Program Statement County Children's Social Worker's Authorization to 	Full Compliance (All)				
		Implement NSPs 3. NSPs Implemented and Discussed with Staff 4. Children Progressing Toward Meeting NSP Case Goals					
		5. Therapeutic Services Received6. Recommended Assessment/EvaluationsImplemented					
		7. County Children's Social Workers Monthly Contacts Documented					
		8. Children Assisted in Maintaining Important					

HERITAGE GROUP HOMES CONTRACT COMPLIANCE REVIEW PAGE 2

		Relationships			
	9.	Development of Timely, Comprehensive Initial			
] 3.	NSPs with Child's Participation	i i		
	10		j		
	10.	Development of Timely, Comprehensive, Updated			
		NSPs with Child's Participation			
13.4					
IV	IV Educational and Workforce Readiness (5 Elements)				
	.				
	1.	Children Enrolled in School Within Three School	Full Compliance (All)		
		Days			
	2.	GH Ensured Children Attended School and			
		Facilitated in Meeting Their Educational Goals			
	3.	Current Report Cards/Progress Reports			
		Maintained			
	4.	Children's Academic Performance and/or			
		Attendance Increased			
	5.	GH Encouraged Children's Participation in YDS or			
		Equivalent Services and Vocational Programs			
V	Healt	th and Medical Needs (4 Elements)			
		(- =			
	1.	Initial Medical Exams Conducted Timely	Full Compliance (All)		
	2.	Follow-Up Medical Exams Conducted Timely	r dii Compilarice (7tii)		
	3.	Initial Dental Exams Conducted Timely			
	4.	Follow-Up Dental Exams Conducted Timely			
	4.	Follow-Op Dental Exams Conducted Timely	9		
VI	<u>Psyc</u>	hotropic Medication (2 Elements)			
		1			
	1.	Current Court Authorization for Administration of	Full Compliance (All)		
		Psychotropic Medication	, , ,		
	2.	Current Psychiatric Evaluation Review			
VII	Pers	onal Rights and Social/Emotional Well-Being			
'''		lements)			
	(.0 _	iomorko)			
	1.	Children Informed of Group Home's Policies and	Full Compliance (All)		
	''	Procedures	r an Compilation (All)		
	2.	Children Feel Safe			
	3.	Appropriate Staffing and Supervision			
	4.	GH's efforts to provide Nutritious Meals and			
	 4.	Snacks			
	_				
	5.	Staff Treat Children with Respect and Dignity			
	6.	Appropriate Rewards and Discipline System			
	7.	Children Allowed Private Visits, Calls and			
		Correspondence			
	8.	Children Free to Attend or not Attend Religious			
		Services/Activities			
	. 9.	Children's Chores Reasonable			
	10.	Children Informed About Their Medication and			
		Right to Refuse Medication			
	11.	Children Free to Receive or Reject Voluntary			

HERITAGE GROUP HOMES CONTRACT COMPLIANCE REVIEW PAGE 3

12. 13.	Medical, Dental and Psychiatric Care Children Given Opportunities to <u>Plan</u> Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) Children Given Opportunities to <u>Participate</u> in Extra-Curricular, Enrichment and Social Activities (GH, School, Community)		
1. 2.	\$50 Clothing Allowance Adequate Quantity and Quality of Clothing	Full Compliance (All)	
3.			
4.	Provision of Clean Towels and Adequate Ethnic Personal Care Items		
5.	Minimum Monetary Allowances		
6.	Management of Allowance/Earnings		
7.			
Disal			
IX <u>Discharged Children</u> (3 Elements)			
1.	Children Discharged According to Permanency Plan	Full Compliance (All)	
2.	Children Made Progress Toward NSP Goals		
3.	Attempts to Stabilize Children's Placement		
Pers	onnel Records		
X Personnel Records (7 Elements)			
_	DO EDI 1040 0 111 171	Full Compliance (All)	
		Full Compliance (All)	
4.		Φ.	
5.	Valid Driver's License	=,	
6.	Signed Copies of Group Home Policies and		
_	Procedures		
7.	All Required Training		
	13. Pers (7 Eld 1. 2. 3. 4. 5. 6. 7. Disc 1. 2. 3. Pers (7 Eld 1. 2. 3. 4. 5.	 Children Given Opportunities to Plan Activities in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) Children Given Opportunities to Participate in Extra-Curricular, Enrichment and Social Activities (GH, School, Community) Personal Needs/Survival and Economic Well-Being (7 Elements) \$50 Clothing Allowance Adequate Quantity and Quality of Clothing Inventory Children Involved in the Selection of Their Clothing Personal Care Items Minimum Monetary Allowances Management of Allowance/Earnings Encouragement and Assistance with Life Book/Photo Album Children Discharged According to Permanency Plan Children Made Progress Toward NSP Goals Attempts to Stabilize Children's Placement Personnel Records Education/Experience Requirement Employee Health Screening/TB Clearances Timely Valid Driver's License Signed Copies of Group Home Policies and Procedures 	

HERITAGE GROUP HOMES CONTRACT COMPLIANCE MONITORING REVIEW FISCAL YEAR 2014-2015

SCOPE OF REVIEW

The following report is based on a "point in time" monitoring visit. This compliance report addresses findings noted during the March 2015 review. The purpose of this review was to assess Heritage Group Homes' (the Group Home's) compliance with the County contract and State regulations, and included a review of the Group Home's program statement, as well as administrative internal policies and procedures. The monitoring review covered the following 10 areas:

- Licensure/Contract Requirements,
- · Facility and Environment,
- Maintenance of Required Documentation and Service Delivery,
- Educational and Workforce Readiness,
- Health and Medical Needs.
- Psychotropic Medication,
- Personal Rights and Social Emotional Well-Being,
- Personal Needs/Survival and Economic Well-Being,
- Discharged Children, and
- Personnel Records.

For the purpose of this review, seven placed children were selected for the sample. The Contracts Administration Division (CAD) interviewed each child and reviewed their case files to assess the care and services they received. Additionally, three discharged children's files were reviewed to assess the Group Home's compliance with permanency efforts. At the time of the review, five of seven sampled children were prescribed psychotropic medication. The children's case files were reviewed to assess for timeliness of Psychotropic Medication Authorizations and to confirm the required documentation of psychiatric monitoring.

CAD reviewed five Group Home staff files for compliance with Title 22 regulations and County contract requirements and conducted site visits to assess the provision of quality of care and supervision.

CONTRACTUAL COMPLIANCE

CAD found the following area out of compliance:

Licensure/Contract Requirements

• Community Care Licensing (CCL) citations.

CCL cited the Group Home as a result of deficiencies and findings noted during the annual inspection on October 21, 2014. According to two reports both dated October 21, 2014, CCL visited two sites simultaneously by two separate analysts. CCL cited the Group Home for only providing children with one snack per day at both sites. CCL requested a Plan of Correction (POC), which required the provision of three snacks per day starting October 21, 2014 and to update the menu to reflect the

HERITAGE GROUP HOMES CONTRACT COMPLIANCE REVIEW PAGE 2

changes made. At the Exit Conference, the Group Home representatives stated that the menu was updated immediately and provided a copy to CCL analyst on-site; CCL cleared the POC.

Recommendation:

The Group Home's management shall ensure that:

1. The Group Home is in compliance with Title 22 regulations and free of CCL citations.

PRIOR YEAR FOLLOW-UP FROM DCFS CAD'S GROUP HOME CONTRACT COMPLIANCE REVIEW

CAD's last compliance report, dated February 17, 2015, identified two recommendations.

Results:

Based on CAD's follow-up, the Group Home fully implemented 2 of 2 recommendations for which they were to ensure that:

- The children's bedrooms are well maintained.
- Initial Needs and Services Plans are developed timely.

Recommendation:

At the Exit Conference, the Group Home representatives expressed the desire to remain in compliance with all Title 22 regulations and contract requirements.

A follow up visit was conducted July 24, 2015, by CAD and the Group Home had implemented the one recommendation from this contract compliance review. CAD will continue to assess ongoing implementation of the recommendation during our next monitoring review. OHCMD will provide ongoing support and technical assistance prior to the next review.



10/13/15

Linda Lai CSAI Contract Compliance Contract Services Bureau 3530 Wilshire Blvd. Los Angeles CA. 90010

Corrective Action Plan Addendum

CCL Finding	Corrective Action Plan		
Heritage Group Homes not serving 3 snacks between meals.	Administrator and House Managers will make sure that all menus that are posted will state that 3 snacks are given to residents. First snack will be issued at 10am, the second snack will be issued at 4pm and the final snack will be issued at 8pm. All snacks will be nutritious and according to title 22 regulations.		

Please do not hesitate to contact me at 562-556-2495 should you have any additional questions or concerns. In closing, our administrative team would also like to thank the auditor for her suggestions and comments in regard to our program that will help us continue to provide the best service to the youth entrusted in our care.

Respectfully Submitted.

Maria Serratos

Program Administrator

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